MAY 04 2018

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	<b>FORM B</b> For New Members, Candidates, and New Employees	LEGISLATIVE RESOURCE CENTER
Name: SETA GROSSMAN D	Daytime Telephone:	U.S. HOUSE OF REPRESENTATIVES
New Member of or Candidate for State: U.S. House of Representatives District: Z.  FILER  Candidates – Date of Election:	Check if Amendment	(Office Use Only)
New Officer or Employee Staff Filer Employing Office: Shared	Staff Filer Type (If Applicable): Shared Principal Assistant to $\Delta r \subset 3/20/2$	A \$200 penalty shall be assessed against any Individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	THESE QUESTIONS	
A. Did you, your spouse, or your dependent child:  a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? Or  b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of	able positions during the reporting lendar year up through the date of filing?
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an Yes No
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No  J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	1 \$5,000 from a Yes No No
ATTACH THE CORRE	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOT		H OF THESE QUESTIONS
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need from this report details of such a trust that benefits you, your spouse, or dependent child?	n Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded child?	Have you excluded Yes 🔲 No 💢
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	come, or liabilities of a spouse or dependent child because they men	et all three tests for Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: SETA GOSSMAN Page\_ D

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Name: JETH GAOSSMAN Page 4 of 10

BLOCK A		BLOCK B			BLOCK C					CK D		BLOG
Assets and/or income Sources		Value of Asset			ype of Inco					of Incom	_	Transi
identify (a) each asset hald for investment or production of income and with a fair market value senseding 81,000 at the end of the reporting period, and (b) any other reportable sesset or source of income that generated more than \$200 in "unearmed" income during the year.	valuation method other th used. If an asset was sold du because it generated inco "Column M is for assets h	eing the reporting perio orns, the value should be	ass specify the method d and is included only "Nene."	529 poceums), y column. Divident if reinvested, m assets held in ter	red sicorni (sur eu n'iny check le, litteraet, and ust be discler sable soccunte.	For accounts that, ch as 401(f), IRA, or; t the "Tax-Deterror" d capital gains, even sed as income for Check None"if the the raporting period.	mnet pe catedoral	of Income s, Interest disclased Check th	by check t, and cap I se incom ione If no i	ng the spi ted gains, se for ose ncome was	propriete box even if reim sta held in i semed or gen	below. purchases ested, seled (3), exchise exchange inited. exceeding
Provide complete names of stocks and mutual funds (do not use only licker symbols).	you have no interest.				•	, -		on passe w		your spou	se or depende	t child period. If only 8 p an accets
For all IRAs and other retrement plans (such as 401(h) plans) provide the value for each easet held in the account that exceeds the reporting thresholds.	A B C D	E F 8 H I	E K L N		, San	area consignation of the constraint of the const	igij ∎	.≣. N	y v	W W		please inc
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For runkei and other real property held for investment, provide a complete address or description, e.g., "rental property," and a tity and state.							\$6					:- : :
For an ownership interest in a privately-held business test is not publicly traded, asses the name of the business, the nature of its activities, and its geographic contion in Block A.										1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Exclude: Your personal maldence, including accord notice and vectilion homes (unless there was market norms during the reporting period); and any financial interest in, or income derived from, a federal altrement program, including the Thritt Savings Plan.						e o Fam Incase)	A Trust egytt	ANG SEL SEL SEL SEL SEL SEL SEL SEL SEL SEL				141 (Dec) (Dec)
f you have a privately-traded fund that is an Excepted revealment Fund, please check the "ER" hax. If you so choose, you may indicate that an asset or			000 11,000,000*		Neast 1		ekile.					h troms on
nicome source is that of your spoure (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far felt. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	000100-100108.8 000100-100118.8	CONTROL IN THE PARTY OF THE PAR	SEA CONTROL SEA DONO DONO DONO DONO DONO DONO DONO DON	WEIT STATE	0.00	Charles Per	15-4200 11-4200	987.23 100F18	96,815,100,88 96,001,816,000	\$11,001 4100,000 \$50,001 4100,000	\$100,001-\$1,000,00 \$1,000,001-\$5,000,00 Over \$5,000,000	7 P. S. S(pa
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Name: SETH GNOSSMAN Page 5 of 18

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or rental and other real property held for investment, rovide a complete address or description, e.g., "remal roperty," and 4 tity and state.		Ť								- 100 - 100 - 100 - 100					THE STATE				- 45 - 12 - 12 - 12 - 12 - 12 - 12										
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xclude: Your personal residence, including accord ornes and vector homes (unless there was rental come during the reporting period); and any financial issuest in, or income derived from, a sident birement program, including the Thrift Savings Plan.													Tion Live Street, San Street,					130	800 S.								100	Princ &1,000,000*	
you have a privately-traded fund that is an Excepted westment Fund, please check the "ENF" box.								1			-909'900'				T.	Ē		5				, 4 , 6							
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or a detailed discussion of Schedule A requirements, ease rater to the instruction booklet.	1	114.408	81,801-615,004	#15,097,458	900'9014'-190'80\$	Station 1 4250 000	8	1 300 g	85 300 St	BE STO	Spound	ğ	OWDEND	MENT	CAPITAL	Except	TAX DEPEN			8242	\$1 001.47 ST	12.50 - 45.00	36,001-\$16,980.	BUT BEST CONTEST	180,084	Cine per			P, S, S(part),
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Assets and/or Income Sources					Value	of A	eset							ype of				1						:сте			Transac
serdify (a) each easel held for invasiment or roduction of income and with a fair martet value susseling \$1,000 at the end of the reporting period, nd (a) any other topoticals assel or sources of income of generated more than \$200 in "ownersed" income using the year.	value used if an becau	seset seset se k g	was : penera is for :	other 1 sold di ted inci	uen fair : ring the rine, the	repor value	visius, ; ing per should b	iansa sp	je incl.	e men ded o	528 Sylicolo N 1	erese i soco enn. E einvec eta he	unts), ; Huldon ted, III ld in ta	med inco ou may is, intere unt be sable so	chec chec et, an etimol	A the 'second second se	nocounts the lO1(k), IRA, o Tax-Deferred al galnut, ever a incorne fe k "None" if the porting period	Column Division must seem	ory of ends, he di units (	income interes sciose check "	a by st, ser el se None	checide d cupit incom if no in held by	ng the tol go a for come	appro agaets wed ea	priets b ren 17 m hald i med er p	ox beio sinveste la texel	e, purchases (F ed, asies (S), or eminarges (i d. exceeding S in the report
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**Assets and/or income Sources** Value of Asset Type of Incom Amount of income Transaction purchases (P), lastes (S), or exchanges (E) exceeding \$1,000 in the reporting xe xe ntal and other real property held for a a complete address or description, ty," and a city and state. 286,001,510,000 286,001,5100,000 289,001,5100,000 289,001,5100,000 21,000,000,515,000,000 21,000,000,515,000,000 \$50,001-\$100,000 \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 \$6,001-\$15,000 22 St. 45,000 14200 \$1-4200 SP Maga Carp. Stock Simon & Schuste MS STOK SUK WELLS PONCO MONGAN STANKY GOVD MAN-PATER POR PM

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Use additional sheets if more space is required.

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# SCHEDULE C - EARNED INCOME

Name: SET	
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Page of O	

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

**EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include data of receipt for honoraria)	Timo	Am	Amount
Source (include date of levelbrilot Horiotalia)	Туре	Current Year to Filing	20 Preceding Year
	Honorarium	\$0	\$500
EXelTIDIES: Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
LAW PROTICE MULLIPLE CLIENTS	BUSINESS	\$9,000 051	000,827
ATLANTIC CAPE COMM COLLEGE	Sprand	101	2042
EGG HIMBON TUP PUBLIC SCHOOLS SPOUSELY	Spause 4	101	853, 400

## SCHEDULE D - LIABILITIES

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exceeded \$10,000. (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting \*Column K is for liabilities held solely by your spouse or dependent child.

			SB		SP, DC, JT		
		M-G-W	J64	Example			
		WELLS FANGO MITG	NOT KNOWN	First Bank of Wilmington, DE	Creditor		
		6/2017		5/98	Date Liability Incurred MO/YR		
	11-4-1	MOJEVEZ ON MOJNA		Mortgage on Rental Property, Dover, DE	Type of Liability		
				·	\$10,001- \$15,000	>	
					\$15,001- \$50,000	₩.	
	,	*			\$50,001- \$100,000	c	
				×	\$100,001- \$250,000	0	
					\$250,001- \$500,000	m	moun
					\$500,001- \$1,000,000	п	Amount of Liability
					\$1,000,001- \$5,000,000	6	ability
					\$5,000,001- \$25,000,000	ı	
					\$25,000,001- \$50,000,000	_	
					Over \$50,000,000	٠	
					Over \$1,000,000* (Spouse/DC Liability)	*	

## SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

REAL JOHN JAN 194000	BONN) MEMBER
9/11/ hile 13010-1 hine8/7	EXEC DIRECTOR
Name of Organization	Position

# SCHEDULE

SCHEDL	SCHEDULE F – AGREEMENTS	Name: SETH GNOSSUMM	Page O of
Identify the d continuation a employer.	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in employer.	ve with respect to: future employment; a leave of absence during the period of government service; ernment; or continuing participation in an employee welfare or benefit plan maintained by a former	riod of government service; an maintained by a former
Date	Parties to Agreement	Terms of Agreement	

# SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

フタカ

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

•		T
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
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